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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875											ing Date 05/2005	To be Mailed	
APPLICATION AS FILED - PART I (Column 1) (Column 2)									OTHER THAN SMALL ENTITY OR SMALL ENTITY				
	FOR	JMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)		
\boxtimes	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A			N/A	300	
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A			N/A		
	EXAMINATION FI (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =		*			x \$ =		OR	x \$ =		
IND	EPENDENT CLAIN CFR 1.16(h))	1S	minus 3 =		*			x \$ =			x \$ =		
	APPLICATION SIZI (37 CFR 1.16(s))	shee is \$2 addi	ts of pap 50 (\$125 tional 50 s	er, the app for small e sheets or f	gs exceed 100 n size fee due for each thereof. See CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))													
* If	he difference in col	umn 1 is less than	r "0" in coluı		TOTAL			TOTAL	300				
APPLICATION AS AMENDED – PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY													
AMENDMENT	09/08/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOU PAID FOR	! JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	* 16	Minus	** 20		= 0		x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	* 2	Minus	***3		= 0		X \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	*	Minus	**		=		x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(h))	*	Minus	***		=		x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
	the entry in column			nstrument Ex	OR (amin	TOTAL ADD'L FEE er:							
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". /KIMBERLY JONES/ *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

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